FORM 1

Use

Only

## STATEMENT OF **ORGANIZATION**

RECEIVED

2013 DEC 27 PM 1: 20

				Office Use Only
NAME OF     COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	MAIL CENTER
OTSUKA AME	RICA PHARM	A.C.EU.TIC.AL	INC. P	QLITICAL
ACTION COM	MITTEE.	<u> </u>		
ADDRESS (number and street)	2440 RESE	ARCH BLVD		
(Check if address is changed)		1.		
	ROCKYILLE		MD L	20850 -  ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	ss			
<ul><li>◆ (Check if address is changed)</li></ul>				
	Optional Second E-Mail Add	ress		1
	•			
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
			1111	
2. DATE 12 2  3. FEC IDENTIFICATION NU	Ť Ž Ŏ Ĭ Š JMBER ► C			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	is Statement and to the best of	of my knowledge and belief it	is true, correct a	and complete.
Type or Print Name of Treasure	PRISCILLA	J. HUANG		
Signature of Treasurer			Date 12	20 2013
NOTE: Submission of false, errone	eous, or incomplete information in ANY CHANGE IN INFORMATIO			the penalties of 2 U.S.C. §437g.
Office		For further information co		FEC FORM 1

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

(Revised 06/2012)